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<p>0010/PTO Rev. 6/95</p> <p style="text-align: center;">U.S. Department of Commerce Patent and Trademark Office</p> <h2 style="text-align: center;">DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</h2> <p> <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing </p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Attorney Docket Number</td> <td style="width: 50%;">H 4086 PCT/US</td> </tr> <tr> <td>First Named Inventor</td> <td>KROPF, Christian</td> </tr> <tr> <td colspan="2" style="text-align: center;">COMPLETE IF KNOWN</td> </tr> <tr> <td>Application Number</td> <td></td> </tr> <tr> <td>Filing Date</td> <td></td> </tr> <tr> <td>Group Art Unit</td> <td></td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> </table>	Attorney Docket Number	H 4086 PCT/US	First Named Inventor	KROPF, Christian	COMPLETE IF KNOWN		Application Number		Filing Date		Group Art Unit		Examiner Name	
Attorney Docket Number	H 4086 PCT/US														
First Named Inventor	KROPF, Christian														
COMPLETE IF KNOWN															
Application Number															
Filing Date															
Group Art Unit															
Examiner Name															

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COMPOSITE MATERIALS COMPRISED OF CALCIUM COMPOUNDS AND PROTEIN CONSTITUENTS

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **6/23/2000** as United States Application Number or PCT International

Application Number **PCT/EP00/05813** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
199 30 335.5	Germany	7/2/1999	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input checked="" type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
		<input type="checkbox"/>

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

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DECLARATION**Page 2**

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365 of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP00/05813	6/23/2000	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name Customer Number or label

☒ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
Wayne C. Jaeschke	21,062	Kimberly R. Hild	39,224
Glenn E. J. Murphy	33,539	Steven C. Bauman	33,832
Stephen D. Harper	33,243		

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number or label **00423** OR ☒ Fill in correspondence address below

Name	Glenn E. J. Murphy						
Address	Henkel Corporation						
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name	Christian	Middle Initial		Family Name	KROPF	Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City	Duesseldorf	State		Country	Germany	Citizenship	Germany
Post Office Address	Caecilienstrasse 4						
Post Office Address							
City	40597 Duesseldorf	State		Zip		Country	Germany
Applicant Authority							

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet				
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name	Marcel			Middle Initial		Family Name	ROTH			Suffix e.g. Jr.				
Inventor's Signature										Date				
Residence: City		Duesseldorf			State		Country	Germany			Citizenship	Germany		
Post Office Address		Am Nettchesfeld 21												
Post Office Address														
City	40589 Duesseldorf			State		Zip		Country	Germany			Applicant Authority		
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name	Ulrike			Middle Initial		Family Name	BRUENINGHAUS			Suffix e.g. Jr.				
Inventor's Signature										Date				
Residence: City		Monheim			State		Country	Germany			Citizenship	Germany		
Post Office Address		Am der Dorfstrasse 6												
Post Office Address														
City	40789 Monheim			State		Zip		Country	Germany			Applicant Authority		
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name	Stefan			Middle Initial		Family Name	MUELLNER			Suffix e.g. Jr.				
Inventor's Signature										Date				
Residence: City		Langenfeld			State		Country	Germany			Citizenship	Germany		
Post Office Address		Hagebuttenweg 21												
Post Office Address														
City	40764 Langenfeld			State		Zip		Country	Germany			Applicant Authority		
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name	Albrecht			Middle Initial		Family Name	WEISS			Suffix e.g. Jr.				
Inventor's Signature										Date				
Residence: City		Langenfeld			State		Country	Germany			Citizenship	Germany		
Post Office Address		Forellenweg 37												
Post Office Address														
City	40764 Langenfeld			State		Zip		Country	Germany			Applicant Authority		
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto														

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DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet				
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name	Ulrich	Middle Initial		Family Name	SCHOERKEN		Suffix e.g. Jr.		
Inventor's Signature						Date			
Residence: City	Leichlingen	State		Country	Germany		Citizenship	Germany	
Post Office Address	Neustrasse 12								
Post Office Address									
City	42799 Leichlingen	State		Zip		Country	Germany		
						Applicant Authority			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name	Lothar	Middle Initial		Family Name	KINTRUP		Suffix e.g. Jr.		
Inventor's Signature						Date			
Residence: City	Duesseldorf	State		Country	Germany		Citizenship	Germany	
Post Office Address	An der Garather Motte 15								
Post Office Address									
City	40595 Duesseldorf	State		Zip		Country	Germany		
						Applicant Authority			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name	Burkhard	Middle Initial		Family Name	ESCHEN		Suffix e.g. Jr.		
Inventor's Signature						Date			
Residence: City	Duesseldorf	State		Country	Germany		Citizenship	Germany	
Post Office Address	Doeberitzer Strasse 18								
Post Office Address									
City	40599 Duesseldorf	State		Zip		Country	Germany		
						Applicant Authority			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name	Amerigo	Middle Initial		Family Name	PASTURA		Suffix e.g. Jr.		
Inventor's Signature						Date			
Residence: City	Witten	State		Country	Germany		Citizenship	Germany	
Post Office Address	Sauerbruchstrasse 3a								
Post Office Address									
City	58453 Witten	State		Zip		Country	Germany		
						Applicant Authority			
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto									

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DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet		
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Peter	Middle Initial		Family Name	WUELKNITZ	Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City	Leichlingen	State		Country	Germany	Citizenship	Germany
Post Office Address	Im Erlengrund 9						
Post Office Address							
City	42799 Leichlingen	State		Zip		Country	Germany
				Applicant Authority			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Ruediger	Middle Initial		Family Name	KNIEP	Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City	Langenfeld	State		Country	Germany	Citizenship	Germany
Post Office Address	Wupperstrasse 26a						
Post Office Address							
City	40764 Langenfeld	State		Zip		Country	Germany
				Applicant Authority			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Hans	Middle Initial		Family Name	LASKA	Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City	Langenfeld	State		Country	Germany	Citizenship	Germany
Post Office Address	Sperberstrasse 10						
Post Office Address							
City	40627 Langenfeld	State		Zip		Country	Germany
				Applicant Authority			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Michael	Middle Initial		Family Name	MEINDERS	Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City	Krefeld	State		Country	Germany	Citizenship	Germany
Post Office Address	Am Eichenhof 11						
Post Office Address							
City	47800 Krefeld	State		Zip		Country	Germany
				Applicant Authority			
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							

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DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Hans	Middle Initial		Family Name	DOLHAINE	Suffix e.g. Jr.			
Inventor's Signature					Date				
Residence: City		Glehn		State		Country		Germany	
Post Office Address		Bendgasse 20							
Post Office Address									
City	41352 Glehn		State	Zip		Country		Germany	
					Applicant Authority				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.			
Inventor's Signature					Date				
Residence: City				State		Country		Citizenship	
Post Office Address									
Post Office Address									
City			State	Zip		Country			
					Applicant Authority				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.			
Inventor's Signature					Date				
Residence: City				State		Country		Citizenship	
Post Office Address									
Post Office Address									
City			State	Zip		Country			
					Applicant Authority				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.			
Inventor's Signature					Date				
Residence: City				State		Country		Citizenship	
Post Office Address									
Post Office Address									
City			State	Zip		Country			
					Applicant Authority				
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Given Name		Middle Initial		Family Name		Suffix e.g. Jr.			
Inventor's Signature					Date				
Residence: City				State		Country		Citizenship	
Post Office Address									
Post Office Address									
City			State	Zip		Country			
					Applicant Authority				
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